

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 55

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

OHIOHEALTH STAR CORPORATION POLITICAL ACTION COMMITTEE DBA OHIOHEALTH PAC

Full Name (Last, First, Middle Initial)

A. David Applegate

Mailing Address 945 Walker Wood Lane

City State Zip Code
 Marysville OH 43040

FEC ID number of contributing federal political committee.

C

Name of Employer

OhioHealth

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 12 / 01 / 2015

Transaction ID : SA11AI.8718

Amount of Each Receipt this Period

200.00

Employee Contribution

Full Name (Last, First, Middle Initial)

B. Earl Barnes

Mailing Address 148 N. Wynstone Drive

City State Zip Code
 Barrington IL 60010

FEC ID number of contributing federal political committee.

C

Name of Employer

OhioHealth Corporation

Occupation

Senior VP General Counsel

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 / 07 / 2015

Transaction ID : SA11AI.8610

Amount of Each Receipt this Period

350.00

Employee Contribution

Full Name (Last, First, Middle Initial)

C. Janet Bay

Mailing Address 7313 Riverside Drive

City State Zip Code
 Powell OH 43065

FEC ID number of contributing federal political committee.

C

Name of Employer

OhioHealth

Occupation

Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 08 / 18 / 2015

Transaction ID : SA11AI.8683

Amount of Each Receipt this Period

500.00

Employee Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

1050.00

TOTAL This Period (last page this line number only)..... ►